

09/1986,452

| POSITION | INDEX | ID NO. | DATE |
|---------------------------|-------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | Off | 1080 | 11/15/86 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|---|--------------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| □ | Allowed | I | Interference |
| - | (Through numeral) ... Canceled | A | Appeal |
| + | Restricted | O | Objected |

| Claim | Date | Claim | Date | Claim | Date |
|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original |
| 50 | 10/01/86 | 51 | | 101 | |
| 51 | | 52 | | 102 | |
| 52 | | 53 | | 103 | |
| 53 | | 54 | | 104 | |
| 54 | | 55 | | 105 | |
| 55 | | 56 | | 106 | |
| 56 | | 57 | | 107 | |
| 57 | | 58 | | 108 | |
| 58 | | 59 | | 109 | |
| 59 | | 60 | | 110 | |
| 60 | | 61 | | 111 | |
| 61 | | 62 | | 112 | |
| 62 | | 63 | | 113 | |
| 63 | | 64 | | 114 | |
| 64 | | 65 | | 115 | |
| 65 | | 66 | | 116 | |
| 66 | | 67 | | 117 | |
| 67 | | 68 | | 118 | |
| 68 | | 69 | | 119 | |
| 69 | | 70 | | 120 | |
| 70 | | 71 | | 121 | |
| 71 | | 72 | | 122 | |
| 72 | | 73 | | 123 | |
| 73 | | 74 | | 124 | |
| 74 | | 75 | | 125 | |
| 75 | | 76 | | 126 | |
| 76 | | 77 | | 127 | |
| 77 | | 78 | | 128 | |
| 78 | | 79 | | 129 | |
| 79 | | 80 | | 130 | |
| 80 | | 81 | | 131 | |
| 81 | | 82 | | 132 | |
| 82 | | 83 | | 133 | |
| 83 | | 84 | | 134 | |
| 84 | | 85 | | 135 | |
| 85 | | 86 | | 136 | |
| 86 | | 87 | | 137 | |
| 87 | | 88 | | 138 | |
| 88 | | 89 | | 139 | |
| 89 | | 90 | | 140 | |
| 90 | | 91 | | 141 | |
| 91 | | 92 | | 142 | |
| 92 | | 93 | | 143 | |
| 93 | | 94 | | 144 | |
| 94 | | 95 | | 145 | |
| 95 | | 96 | | 146 | |
| 96 | | 97 | | 147 | |
| 97 | | 98 | | 148 | |
| 98 | | 99 | | 149 | |
| 99 | | 100 | | 150 | |

If more than 150 claims or 10 actions
staple additional sheet here

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